

<b>AMENDMENT TRANSMITTAL LETTER</b>				Docket No. 1381-0307P																														
Application No 10/756,380-Conf. #2366	Filing Date January 14, 2004	Examiner T. W. Smith	Art Unit 2837																															
Applicant(s): Jyrki LAAKSONHEIMO																																		
Invention: METHOD FOR CORRECTING SPEED FEEDBACK IN A PERMANENT-MAGNET MOTOR																																		
<p><b>MS RCE</b>  <b>Commissioner for Patents</b>  <b>P.O. Box 1450</b>  <b>Alexandria, VA 22313-1450</b></p> <p>Transmitted herewith is an amendment in the above-identified application.</p> <p>The fee has been calculated and is transmitted as shown below.</p>																																		
<p style="text-align: center;"><b>CLAIMS AS AMENDED</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;"></th> <th style="width: 15%; text-align: center;">Claims Remaining After Amendment</th> <th style="width: 15%; text-align: center;">Highest Number Previously Paid</th> <th style="width: 15%; text-align: center;">Number Extra Claims Present</th> <th style="width: 15%; text-align: center;">Rate</th> </tr> </thead> <tbody> <tr> <td><b>Total Claims</b></td> <td style="text-align: center;">13</td> <td style="text-align: center;">- 20 =</td> <td></td> <td style="text-align: center;">X</td> </tr> <tr> <td><b>Independent Claims</b></td> <td style="text-align: center;">2</td> <td style="text-align: center;">- 3 =</td> <td></td> <td style="text-align: center;">X</td> </tr> <tr> <td colspan="5" style="text-align: center;">Multiple Dependent Claims (check if applicable) <input type="checkbox"/></td> </tr> <tr> <td colspan="4" style="text-align: center;">Other fee (please specify): Request for continued examination (RCE) (see 37 CFR 1.114); Extension for response within first month</td> <td style="text-align: center;">910.00</td> </tr> <tr> <td colspan="5" style="text-align: center;"><b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b> 910.00</td> </tr> </tbody> </table>						Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	<b>Total Claims</b>	13	- 20 =		X	<b>Independent Claims</b>	2	- 3 =		X	Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					Other fee (please specify): Request for continued examination (RCE) (see 37 CFR 1.114); Extension for response within first month				910.00	<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b> 910.00				
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate																														
<b>Total Claims</b>	13	- 20 =		X																														
<b>Independent Claims</b>	2	- 3 =		X																														
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>																																		
Other fee (please specify): Request for continued examination (RCE) (see 37 CFR 1.114); Extension for response within first month				910.00																														
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b> 910.00																																		
<p><input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity</p> <p><input type="checkbox"/> No additional fee is required for this amendment.</p> <p><input checked="" type="checkbox"/> Please charge Deposit Account No. <u>02-2448</u> in the amount of \$ <u>910.00</u>. A duplicate copy of this sheet is enclosed.</p> <p><input type="checkbox"/> A check in the amount of \$ _____ is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No <u>02-2448</u> as described below. A duplicate copy of this sheet is enclosed</p> <p><input checked="" type="checkbox"/> Credit any overpayment.</p> <p><input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17</p>																																		
 Dated: <u>May 18, 2007</u>																																		
<i>f/ Michael K. Mutter</i> Attorney Reg No : 29,680																																		
BIRCH, STEWART, KOLASCH & BIRCH, LLP 8110 Gatehouse Road Suite 100 East P.O. Box 747 Falls Church, Virginia 22040-0747 (703) 205-8000																																		